Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>2-27-2007</u>	Address:	CR 750 S West of SR 121
Case #:	. <u>41-18677</u> .		<u>Connersville</u>
County:	<u>Fayette</u>		
Type of Laboratory Scizure (check one) Seizure Loca			heck all that apply)
	onal Lab al/Glassware/Equipment (only) te (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
∑ Flammable Solvents: Open			
Water Reactive Metal (Lithium): Open			
Anhydrous Ammonia:			
☐ Hydrochloric Acid Gas Generator(s):			
Corrosive Acid;			
Corrosive Base:			
Other (item and location):			
Yes _ No	r age 18 discovered (check one) (number present) port to Child Protective Services	☐ Ephedrine ☐ Retail/Me	EInformation Pseudocphedrine Tracking Log rehant Tip VEnforcement
This report is to be faxed to the following agencies that serve the location:			
Fire Departr	nent: Glenwood	Fax: <u>N/A</u>	
Health Department: Fayette County		Fax: <u>765-82</u> Fax:	
Child Protec	etion Service:	<u></u>	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Jeremy Woods</u> Phone <u>I-800-761-2985</u>			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.